



STATE OF WASHINGTON
**APPLICATION FOR CHANGE/TRANSFER
OF WATER RIGHT**

For filing with Ecology or with County Conservancy Boards



A MINIMUM FEE OF \$10.00 PAYABLE TO ECOLOGY MUST ACCOMPANY THIS APPLICATION

(Check all that apply.)

- ☒ Change purpose(s) of use
☐ Add purpose(s) of use
☒ Change point(s) of diversion/withdrawal
☒ Add point(s) of diversion/withdrawal
☒ Change/transfer place of use
☐ Other (i.e. consolidation, intertie, trust water)

Explain: _____

FOR OFFICE USE ONLY	
CHANGE No. <u>CG4-WRC157058@1</u>	WRIA <u>45</u>
DATE ACCEPTED <u>03/14/01</u>	BY <u>sa</u>
FEE \$ <u>60.00</u>	REC'D <u>2/22/01</u>
CHECK No. <u>1254</u>	
SEPA: <input checked="" type="checkbox"/> Exempt	<input type="checkbox"/> Not exempt
<u>4 OF 6</u>	

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

1. Applicant Information:

APPLICANT/BUSINESS NAME <u>Peshastin Water District</u>	PHONE NO. <u>(509) 548-7537</u>	FAX NO. <u>()</u>
ADDRESS <u>P.O. Box 751</u>		
CITY <u>Peshastin</u>	STATE <u>WA</u>	ZIP CODE <u>98847</u>
CONTACT NAME (IF DIFFERENT FROM ABOVE) <u>Jim Weaver, member board of directors</u>	PHONE NO. <u>() see above</u>	FAX NO. <u>()</u>
ADDRESS <u>same as above</u>		
CITY	STATE	ZIP CODE

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER <u>Claim Registry No. 157058</u>	RECORDED NAME(S) <u>Community Water Ass'n</u>
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME: <u>currently organized as Peshastin Water District</u>	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application. Statement of use is included with attached project description.

FOR OFFICE USE ONLY			
APP. NO. _____	PERMIT NO. _____	CERT. NO. _____	CERT. OF CHANGE NO. _____

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
wells	SO2	SW	SW	16	24N	18EWM		
		(Tax	38 of	Lot 8	of Peshastin	Orchards)		

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
See Attachment.								

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☒ YES ☐ NO PROPOSED: ☒ YES ☒ NO - IF NO, PROVIDE OWNER(S) NAME:

See Attachment.

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment. Well reports are attached.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
domestic	250 gpm	approx. 85	January 1- December 31

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
municipal use	250 gpm	85	no change

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
Sec. 16; E½ Sec. 17; NE¼ Sec. 20; NW¼ Sec. 21 Township 24 North, Range 18 East W.M.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
			24N	18EWM	Chelan	various	
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO - IF NO, PROVIDE OWNER(S) NAME: water purveyor							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
Area served by the Peshastin Water District as described by the most recent water system plan approved by the Washington Department of Health.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
			24N	18EWM	Chelan	various	
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO - IF NO, PROVIDE OWNER(S) NAME: water purveyor							

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map. Map is attached.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?
☒ YES ☐ NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): Changes requested concurrently on WRC 112962, 157057, 157058; GWC Nos. 6890-A, 1022-D, 1023-D. There may be other rights of record within the place of use.

6. Remarks and Other Relevant Information:

See Attachment.

IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

X Mark Peters 3/26/11
(Applicant) (Date)

by Mark Peterson 2/1 for Peshastin Water District

*see below note / /
(Water Right Holder) (Date)

*see below note / /
(Land Owner(s) of Existing Place of Use) (Date)

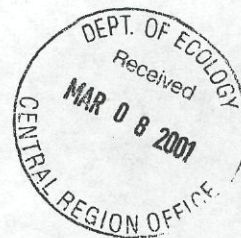
*Permission has been granted by the owner for Peshastin Water District to proceed with this change application.

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- ☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE
☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE
☐ OTHER/EXPLANATION: _____

STAFF: _____ DATE: ____/____/____



Peterson Law Office
103 Palouse, Suite 31
Wenatchee, WA 98801

3/7/01

Sandy Anderson
Water Resources Program
Department of Ecology
15 West Yakima Avenue, Suite 200
Yakima WA 98902

Re: *Peshastin*

Dear Sandy,

Thank you for requesting original signature pages for each of the six water rights transfers for Peshastin Water District (see attached for numbers) I understand that this will allow you to finish your processing.

Thanks,

Mark Peterson

(p. 5. please note Declarative of support from Water Right Owners in Application Materials)

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x Onas L. Morseman 3/8/00
(Applicant) (Date)
by: Onas L. Morseman for Peshastin Water District

same / /
(Water Right Holder) (Date)

water purveyor / /
(Land Owner(s) of Existing Place of Use) (Date)

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STAFF: _____ DATE: ____/____/____